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TELECOPY COVER SHEET

EQUIPMENT OPERATOR CONTACT NUMBER: 508-303-3373. PLEASE CALL IF YOU DO NOT RECEIVE ALL THE PAGES.

**TO: EXAMINER WILLIAM H. BEISNER
UNITED STATES PATENT AND TRADEMARK OFFICE
ALEXANDRIA, VA 22313-1450**

Telephone (571) 272-1269

Fax (571) 273-8300

FROM: William G. Guerin (Reg. No. 41,047)

Number of Pages INCLUDING This Cover Sheet : 15

DATE: August 8, 2006

RE: Amendment and Response to Office Action Mailed March 8, 2006

Application Serial No.: 10/825,883

Attorney Docket No. NXL-001

COMMENTS: Transmitted Herewith: Transmittal Form (1 pg); Petition for Extension of Time Under 37 CFR 1.136(a) (1 pg); Duplicate Copy of Petition for Extension of Time Under 37 CFR 1.136(a) (1 pg); Fee Transmittal (1 pg); and Amendment & Response to Office Action Mailed March 8, 2006 (10 pgs).

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PTO/SB/21 (07-08)

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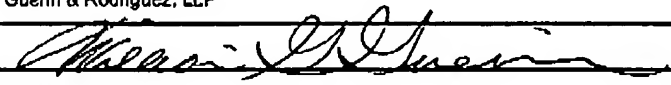
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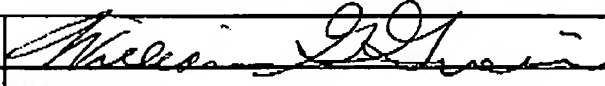
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/825,883
	Filing Date	April 17, 2004
	First Named Inventor	QIU
	Art Unit	1744
	Examiner Name	BEISNER, WILLIAM H.
Total Number of Pages In This Submission	Attorney Docket Number	NXL-001

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Duplicate copy of extension of time request
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Guerin & Rodriguez, LLP		
Signature			
Printed name	William G. Guerin		
Date	August 8, 2006	Reg. No.	41,047

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	William G. Guerin	Date	August 8, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<p style="text-align: center;">Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918).</p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2005</h3> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>TOTAL AMOUNT OF PAYMENT (\$)</p>	<p style="text-align: center;">Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>10/825,883</td></tr> <tr><td>Filing Date</td><td>April 17, 2004</td></tr> <tr><td>First Named Inventor</td><td>QIU</td></tr> <tr><td>Examiner Name</td><td>BEISNER, WILLIAM H.</td></tr> <tr><td>Art Unit</td><td>1744</td></tr> <tr><td>Attorney Docket No.</td><td>NXL-001</td></tr> </table>	Application Number	10/825,883	Filing Date	April 17, 2004	First Named Inventor	QIU	Examiner Name	BEISNER, WILLIAM H.	Art Unit	1744	Attorney Docket No.	NXL-001
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Examiner Name	BEISNER, WILLIAM H.												
Art Unit	1744												
Attorney Docket No.	NXL-001												

METHOD OF PAYMENT (check all that apply)

☐ Check
☐ Credit Card
☐ Money Order
☐ None
☐ Other (please identify): _____

☒ Deposit Account
Deposit Account Number: 502295
Deposit Account Name: Guerin & Rodriguez, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below
☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE


If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____

- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): two month extension of time fee	225

SUBMITTED BY		
Signature 	Registration No. 41,047 (Attorney/Agent)	Telephone 508-303-2003
Name (Print/Type) William G. Guerin	Date August 8, 2006	

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